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RUNCORN RURAL DISTRICT



Annual Report

OF THE

Medical Officer of Health

FOR THE

Year ending 31st December
1951



RURAL DISTRICT AUTHORITY OF RUNCORN

ANNUAL REPORT

1 9 5 1

by

E. N. HILLMAN GRAY, L.R.C.P. & S., L.M., D.P.H.
MEDICAL OFFICER OF HEALTH
RUNCORN URBAN AND RURAL DISTRICTS

OFFICIALS OF PUBLIC HEALTH DEPARTMENT :

- (1) Medical Officer of Health, Runcorn Urban and Rural Districts
- (2) Divisional Medical Officer of Health
Divisional School Medical Officer (Runcorn Division)

E. N. HILLMAN GRAY, L.R.C.P. & S., L.M., D.P.H.
(Office Tel. No.: Frodsham 2186
Home Tel. No.: Great Mollington 66)

Sanitary Inspectors and Meat and Food Inspectors :

- D. BOOTHMAN, M.S.I.A., Senior Sanitary Inspector
National Certificate in Building
Certified Sanitary Inspector (R.S.I. and S.I.E.J.B.)
Certified Inspector of Meat and other Foods (R.S.I.)
Offices: Public Health Department, Castle Park, Frodsham.
Tel. No.: Frodsham 2186
Sub-Office, 22 Orchard Street, Stockton Heath.
Tel. No.: Stockton Heath 1024
Home: Tel. No.: Frodsham 2219

- G. F. SIXSMITH, Additional Sanitary Inspector
Certified Sanitary Inspector (R.S.I. and S.I.E.J.B.)
Certified Inspector of Meat and other Foods (R.S.I.)
Housing Management Certificate (The Institute of Housing)
Diploma in General Hygiene Advanced (R.I.P.H. & H.)
Home Tel. No.: Warrington 2824

Clerk/Pupil Sanitary Inspectors :

P. MOSS
E. H. PEET

Clerical Duties :

MRS. B. GOLDER

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AN APPEAL TO ALL CONCERNED, ESPECIALLY TO VOLUNTARY SOCIETIES, IS AGAIN MADE TO MAKE FULL USE OF THIS REPORT; DISCUSSION GROUPS, ETC., IN HEALTH EDUCATION SHOULD BE ARRANGED FOR IN THE INTERESTS OF PUBLIC HEALTH AT FREQUENT INTERVALS.

SPECIAL ATTENTION IS DRAWN TO APPENDIX A

RURAL DISTRICT COUNCIL OF RUNCORN, 1951

From 22nd May, 1951

Chairman of the Council:

COUNCILLOR JAMES HUNT, J.P.

Vice-Chairman of the Council:

COUNCILLOR HAROLD HILL

Health Committee:

COUNCILLOR H. PEAKE, J.P., *Chairman*

COUNCILLOR J. W. KIRKHAM, *Vice-Chairman*

Councillor W. H. CAPPER, J.P.	Councillor R. E. PAYTON
„ D. L. DAVIES	„ H. PEACOCK
„ H. R. DONE	„ Mrs. E. STANSFIELD, J.P.
„ Mrs. J. A. GLOVER	„ G. S. WALLWORTH
„ W. S. LOOKER	„ C. WILKINSON
	„ G. WILLIAMS

and Chairman and Vice-Chairman of the Council

OFFICERS:

Solicitor/Clerk of the Council:

Mr. R. PATRICK WILLIAMS, Frodsham

Engineer and Surveyor:

Mr. A. J. KING, A.M.I.C.E., M.I.M. & Cy.E., Frodsham
retired February, 1951

Mr. B. PRESTON, B.Sc., A.M.I.C.E., M.I.Mun.E., M.R.San.I.,
Frodsham — appointed July, 1951

INTRODUCTION

TO THE CHAIRMAN AND MEMBERS OF THE
RURAL DISTRICT COUNCIL OF RUNCORN

Ladies and Gentlemen,

My Annual Report for the year ending 31st December, 1951, is a satisfactory one as it applies to the health of the people: Infectious Disease (notifiable) is less than ever, though a warning must be given to all concerned that they should have their child/children *properly* immunised against diphtheria; immunisation against whooping cough is also available *free of charge* by the patient's own doctor or at school or welfare clinics.

Again, *housing of the people* is the matter which counts, especially for young couples; much worry and anxiety is caused through persons living in overcrowded and/or insanitary houses or living with others, though it must be stated my Council have done as well as possible in relieving this matter.

Special attention is drawn to Appendix "A"—"The Common-sense Preventive Measures Against Disease"—if all concerned read and carried these measures out, disease would be even less than it is.

Finally, as stated in previous Reports, as one of the measures of having "HEALTH AND THE JOY OF LIFE"—*WORK HARD—PLAY HARD—and—LEARN TO RELAX.*

With research and its results applied sincerely and scientifically we can have proper shelter for the people, more land (at home and overseas) under cultivation, this means we could have more homes, more food and more work for all, all over the world—the Bill of Human Rights (United Nations) demands we *start at once* to have these.

Annual Report, 1951—Divisional Medical Officer of Health (Runcorn Division). By agreement with the Cheshire County Council and my local Councils, this Report is included as an Appendix "B" and attached hereto.

The co-operation and help of all concerned outside my offices, in the Public Health Department and other Departments has been greatly appreciated by me in the carrying out of my various duties—without the "team spirit" it would be difficult to obtain results.

I beg to remain,

Your obedient Servant,

E. N. HILLMAN GRAY,
Medical Officer of Health.

SECTION A

STATISTICS AND SOCIAL CONDITIONS OF THE AREA

(a)	Area (in acres)	....	....	....	....	45,765
(b)	Estimated population (Registrar-General)	....	....	....	....	35,510
(c)	Number of inhabited houses (end 1951) according to the Rate Books	....	....	....	....	10,616
(d)	Rateable value of the District (end 1951)	....	....	....	....	£218,276
(e)	Sum represented by one penny rate (approx.)	....	....	....	....	£883
(f)	Density of Population. Number of persons per acre (estimated population)	....	....	....	....	.78
(g)	Average number of persons per inhabited house (estimated population)	....	....	....	....	3.34

Social Conditions

Agriculture and dairy farming are the chief industries of the district; other industries are tanneries, electric cable, electric fittings and steel tubes works, flour mills and jam works. Sand quarrying is being carried on in the district, chiefly at Whitley and Moore.

Parts of the district are mainly residential.

Unemployment.—Exact statistics are not available for this area as the figures obtained by the local offices of the Ministry of Labour related to the areas served by such offices and these areas are not identical with the Runcorn Rural District. The incidence of unemployment, however, was low in the area.

Many of the inhabitants are employed in industrial areas outside the district.

Children's homes and sanatoria.—There is a National Children's Home at Frodsham (270 children), one open-air Convalescent School for Jewish Children at Norley; two sanatoria at Manley each accommodating about 300 persons (nursing staff being available).

Welfare Centres (Cheshire County Council).—At present there is a Welfare Centre (fully staffed) at Helsby, Frodsham, Stockton Heath, Grappenhall and Antrobus. A Welfare Centre was opened in Kingsley in 1951. Attendances at these are very satisfactory.

VITAL STATISTICS

			<i>Total</i>	<i>M.</i>	<i>F.</i>
Live Births—Legitimate	....	....	476	236	240
Illegitimate	....	....	15	10	5
			<hr/>	<hr/>	<hr/>
			491	246	245
Birth rate per 1,000 of the estimated resident population	....				13.83

			<i>Total</i>	<i>M</i>	<i>F</i>
Still Births—Legitimate	....	....	7	4	3
Illegitimate	....	....	1	1	0
			<hr/>	<hr/>	<hr/>
			8	5	3

Rate of Still Births per 1,000 total (Live and Still births): 16.29.

Deaths 493 250 243

Death Rate per 1,000 of the estimated resident population 13.89

Deaths from Puerperal Causes

(Heading 30 of the Registrar-General's Short List):

No. 30 Pregnancy, childbirth, abortion.....Nil

Death Rate of Infants Under One Year of Age

All Infants per 1,000 live births (24 deaths) Death Rate 48.88

Legitimate Infants per 1,000 legitimate live births 50.42

Illegitimate Infants per 1,000 illegitimate live births 0.00

Particulars of any Unusual or Excessive Mortality during the year which has received or required comment

The causes of the highest mortality were:

Heart Disease 104 (*Vide* Registrar-General)

Cancer 65 ,,

Heart Disease was prevalent in persons over 65 years of age, some cases may have been due to the effects of e.g., Rheumatism in childhood—this is being further investigated under the auspices of the Ministry of Health (lack of vitamin C, gland deficiency, etc.).

For further remarks on Cancer see page 32 (i.e., further research, early treatment, etc.).

COMPARISON RATES

<i>Year</i>	<i>Population</i>	<i>Birth Rate</i>	<i>Death Rate</i>	<i>Infantile Mortality Rate</i>
1941	33,000	12.28	10.53	39
1942	33,000	14.2	11.2	29.6
1943	33,000	15.7	11.5	46.5
1944	33,000	18.24	10.55	34.54
1945	31,710	15.5	11.07	32.58
1946	32,760	16.9	11.69	32.43
1947	32,930	16.85	11.93	48.6
1948	34,230	15.37	11.08	36.13
1949	34,550	11.75	11.92	27.66
1950	35,580	13.91	10.72	20.20
1951	35,510	13.83	13.89	48.88

(Population figures for 1941-1944, estimate only.)

A table on page 29 gives the Birth Rate, Death Rate and analysis of mortality during the year 1951 and comparisons with England and Wales, London and the other great and smaller towns.

There were 329 deaths of persons over 65 years of age.

			<i>M.</i>	<i>F.</i>	<i>Total</i>
From 65-69	Number of Deaths	....	38	27	65
„ 70-79	„ „ „	....	65	81	146
„ 80-89	„ „ „	....	40	64	104
„ 90-99	„ „ „	....	4	10	14

Summary of Deaths of Infants under 1 year of age

1 (a) Broncho-pneumonia; (b) Influenza	Male aged 7 months
Suffocation due to vomiting and burying his face in the pillow	Male aged 2 months
1 (a) Haemolytic disease of newborn	Male aged 2 days
Congenital abnormality of the heart in the form of a patent inter ventricular septum	Female aged 2 days
1 (a) Prematurity (weight 3lb.)	Female aged 2 days
1 (a) Pneumonia; (2) Prematurity 28 weeks, weight 2lb. 14oz.	Male aged 2 weeks
1 (a) Prematurity 28 weeks, weight 2lb. 14oz. (2) Maternal Gangrenous Appen- dicitis	Male aged 12 hours
1 (a) Broncho-Pneumonia	Male aged 1 week
1 (a) Shock; (b) Premature Birth	Male aged 5 minutes
1 (a) Lobar-Pneumonia	Female aged 2 weeks
1 (a) Prematurity 28 weeks, weight 2 lb. 12oz.; (2) Maternal Severe Cardiac Failure	Male aged 1 day
1 (a) Prematurity; (b) Ante-partum haemorrhage	Female aged 6 days
1 (a) Broncho-Pneumonia	Female aged 1 week
1 (a) Prematurity	Female aged 1 week
1 (a) Subdural haemorrhage; (b) Tissue fragility; (c) Maternal Thyrotoxicosis	Male aged 6 days
1 (a) Atelectasis(2) Asphyxia at birth	Female aged 5 hours
1 (a) Intracranial Trauma; (b) Birth injury. (2) Prematurity	Male aged 2 days
1 (a) Pneumococcal Meningitis	Female aged 4 months
Acute Meningococcal Septicaemia	Male aged 4 months
1 (a) Pneumonia; (b) Prematurity, weight 3lb. 5oz.	Female aged 1 week
1 (a) Congenital Cardiac Failure (b) Pneumonia	Male aged 3 weeks
Suffocation whilst in bed with his parents	Male aged 3 months
1 (a) Prematurity	Male aged 1 hour
1 (a) Atelactasis	Female aged 2 days

Prevention of any Unusual or Excessive Mortality—Children

Treatment in a General Hospital or an Infectious Disease Hospital, etc., is available for all such cases if any Doctor decides that treatment will benefit, and the patient is fit to be moved. Premature births are specially treated in Hospital or Nursing Homes. District Nurses assist in nursing at home (via the patient's own doctor).

The above is in addition to Health Education, Welfare Schemes and Clinics, etc.

SECTION B GENERAL PROVISIONS OF HEALTH SERVICES FOR THE AREA

1. Public Health Officers

The names and qualifications, districts, addresses and telephone numbers are given at the beginning of the Report.

2. Laboratory Facilities

The Biological Institute of Messrs. Evans Medical Supplies is established in Runcorn. The Institute can supply serum for cases of Anthrax *in emergency*.

With the facilities given by the Public Health Laboratory, Hamilton Square, Birkenhead, the Public Health Laboratory, Monsall Hospital, Newton Heath, Manchester, and the Public Health Laboratories at Warrington and Chester Royal Infirmaries, also various General Hospital Laboratories, all concerned will now be able to make fuller arrangements for pathological overhauls *so essential* in certain cases. It is hoped that this extended service will give all concerned further facilities in the investigation of infectious disease and disease generally (e.g., by pathological overhauls).

Milk is sent to the Public Health Laboratory, Hamilton Square, Birkenhead.

V.D. specimens are sent to the laboratories mentioned above, as required.

SECTION C

1. Water

(i) The water supply of the area has been satisfactory both in quality and quantity, with the exception of isolated farms and houses not on a mains supply.

(ii) Mains supplies and results of chemical analyses and bacteriological examinations are as follows. Parishes refer to the main areas; outlying portions of parishes may be connected to other mains.

Alvanley and Helsby—by the Council from Helsby Wells.

Dutton, Kingsley, Norley, Preston Brook and Sutton—by the Council from Liverpool (Vyrnwy) bulk supplies.

Frodsham, Manley, Antrobus and Whitley—by the Council from Warrington Corporation bulk supplies.

Stockton Heath, Grappenhall, Walton, Appleton, Stretton, Moore, Daresbury—by Warrington Corporation.

Halton and Clifton—by Runcorn and District Water Board.

Aston and Norton—by private estate mains, the bulk supply being Liverpool (Vyrnwy).

Budworth—by the Council from Mid and South East Cheshire Water Board bulk supplies.

<i>Chemical Analyses</i>	<i>Helsby Well (no treatment) to Alvanley, Helsby</i>	<i>Warrington Harrol Edge to Frodsham, Manley,</i>	<i>Liverpool Vyrnwy to Aston, Dutton, Kingsley, Norley, Norton, Preston Brook, Sutton</i>	<i>Runcorn and District Water Board to Halton</i>	<i>Warrington Vyrnwy mixed to Stockton Heath Area and most other Parishes</i>	<i>Mid and South-East Cheshire Water Board to Budworth Village and Ball Lane, Kingsley</i>
Date	24.5.50	15.11.50	15.11.50	16.1.47	22.11.50	6.3.51
Appearance	Clear and Colourless	Clear and Colourless	Clear and slight yellow	Clear and slight yellow	Clear and slight yellow	Clear and Colourless
Odour	Nil	Nil	Nil	Nil	Nil	Nil
Reaction	pH 7.4	pH 7.0	pH 6.4	pH 6.9	pH 6.3	pH 7.1
<i>Parts per million</i>						
Total solids	304	188	50	37	63	286
Nitrogen as free and saline ammonia	0.00	0.00	0.00	0.12	0.00	Nil
Nitrogen as albuminoid ammonia	0.005	0.00	0.04	0.03	0.03	0.005
Nitrogen as nitrites	Nil	Nil	Nil	Nil	Nil	Nil
Nitrogen as nitrates	1.1	2.25	0.00	0.25	0.2	4.8
Chlorides as Cl.	40	30	9	10	10	24
Oxygen absorbed from permanganate in four hours at 27° C.	0.028	0.06	3.03	2.79	3.5	0.16
Total hardness	200	130	30	30	30	170
Temporary hardness	175	96	12	12	12	104
Permanent hardness	25	34	18	18	18	66
Alkalinity as CaCO ₃	175	96	12	Nil	12	104
Free chlorine	Nil	Nil	Nil	Nil	Nil	Nil
Poisonous metals	Absent	Nil	Nil	Nil	Lead 0.15 Zinc nil, Copper little trace	Absent
Bacteriological Examination:—						
Date	27.11.51	16.7.51	23.10.51	16.7.51	29.10.51	19.10.51
Probable number of coliform bacilli per 100 m.l.	Nil	Nil	2	1	3	Nil
% of above faecal coli Report	Satisfactory	Satisfactory	Satisfactory	Satisfactory	Satisfactory	Satisfactory

Analyst's Opinion

Helsby 24.5.50.—The chemical analysis of this water is satisfactory.

Warrington Harrol Edge 15.11.50.—The chemical analysis of this water is satisfactory and of great organic purity.

Liverpool Vyrnwy 15.11.50.—The chemical analysis of this water is satisfactory and contains only organic matter found present from an upland gathering ground.

Runcorn and District Water Board 16.1.47.—The chemical and bacteriological conditions are satisfactory.

Warrington Vyrnwy mixed 22.11.50.—This water is of satisfactory chemical quality. Poisonous metals are negligible.

Mid and South-East Cheshire Water Board 6.3.51.—The chemical analysis of the sample is satisfactory.

(iii) Private water supplies are bacteriologically examined at least once per year. Where, as a result of such sampling, the supplies have been established as unsatisfactory, Notices advising that the water be boiled or chlorinated before drinking, dietetic and dairy purposes are sent and repeated quarterly to the owners and occupiers.

A list of all properties not on a mains supply and the quality of their existing supply was forwarded to the Ministry of Health and County Medical Officer of Health in 1945. The Council's schemes to bring mains supplies to some of these properties under the provisions of the Rural Water Supplies and Sewerage Act, 1944, had not received approval for grants.

Where farms and farm cottages are concerned, the owners are strongly advised to obtain a mains supply with the assistance of the Cheshire Agricultural Committee under the Agricultural (Misc. Prov.) Act, 1944, Sec. 5.

Two milk-producing farms have been given mains supplies under such a scheme. Two other houses have been connected to mains supplies.

A link main was carried out in Stretton, which improved the water pressure in parts of Antrobus and Whitley.

(iv)

Parish	(a) Public Water Mains				(b) Private Supplies					
	Direct to house		Standpipes		Private Water Mains		Wells and Springs			
	Houses	Popu- lation	Houses	Popu- lation	Houses	Popu- lation	Good Quality	Popu- lation	Suspicious or unsatisfactory Quality	Popu- lation
Alvanley.....	79	263	2	5	—	—	2	6	2	6
Antrobus.....	214	663	1	5	—	—	1	3	6	18
Appleton.....	926	2926	—	—	—	—	2	5	1	3
Aston.....	43	125	—	—	27	87	—	—	2	4
Budworth (Great).....	112	356	—	—	—	—	—	—	—	—
Daresbury.....	67	218	—	—	—	—	3	10	2	7
Dutton.....	92	401	—	—	—	—	1	3	—	—
Frodsham.....	1555	5150	1	3	—	—	—	—	2	13
Grappenhall.....	1758	5807	—	—	—	—	—	—	—	—
Halton.....	455	1619	—	—	—	—	—	—	—	—
Hatton.....	87	296	—	—	—	—	4	12	1	4
Helsby.....	822	2756	—	—	—	—	—	—	—	—
Kingsley.....	320	1241	20	64	—	—	2	6	13	41
Manley.....	133	599	—	—	—	—	1	5	6	20
Moore.....	156	510	—	—	—	—	—	—	—	—
Norley.....	274	945	—	—	—	—	1	4	2	5
Norton.....	16	55	—	—	22	73	3	10	—	—
Preston Brook.....	111	332	—	—	1	4	—	—	10	35
Stockton Heath.....	2243	7370	—	—	—	—	—	—	—	—
Stretton.....	129	450	—	—	—	—	—	—	2	7
Sutton.....	204	680	—	—	—	—	—	—	—	—
Walton.....	508	1708	—	—	—	—	2	7	—	—
Whitley.....	161	546	4	13	—	—	—	—	2	6
Totals.....	10465	35016	28	90	50	164	22	71	51	169

(2) Drainage and Sewerage

The sewerage and sewage disposal scheme for Sutton was continued and approximately 75 per cent of the work was completed by the end of the year.

A detailed survey of Kingsley and Norley for sewerage and sewage disposal was completed, but further details were required by the County Council concerning the possibility of including the parish of Crowton in Northwich Rural District.

A report is being prepared on the Frodsham pumping plant and works.

The ten-year programme decided by my Council in 1945 is as follows:—

1. Frodsham—installation of new pumping plant at sewage pumping station.
2. Helsby—new intercepting sewer and sewage disposal works extension.

3. Great Budworth—sewers and sewage disposal works.
4. Stretton—sewer extension and pumping station.
5. Acton Grange sewage outfall works extensions, Moore sewer extensions and pumping station and Appleton sewer extension.
6. Kingsley and Norley—sewers and sewage disposal works.
7. Alvanley—sewer extensions.

When septic tanks are installed it is important that *adequate filtration or subsoil irrigation* is provided to prevent pollution of watercourses and ditches. *In addition, the septic tanks should be maintained and desludged at regular intervals.* Many inspections have been carried out in connection with existing installations and in giving advice on new proposed works.

Two drainage systems were connected to the sewer, including the Cuerdon Estate of 22 houses at Thelwall.

3. Rivers and Streams

Pollution of streams and ditches tends to increase owing to the erection of new houses, improved sanitary appliances to existing houses and improved milk and dairy technique in parishes without sewers. Private owners are advised on the best type of septic tanks and filters for their property. Where such properties are in groups, the only final satisfactory solution is the provision of a sewer and sewage disposal works. Liquor from cowsheds presents a particularly difficult problem where it is not collected and returned to the land as manure.

The Council have ordered a cesspool emptying vehicle to be used for night soil collection and to be available for the desludging of septic tanks, which should provide for the better maintenance of these septic tanks.

Where plans are submitted to the Engineer and Surveyor involving drainage systems not connected to a public sewer, the observations of this department have been sought on the efficiency of the proposed drainage disposal.

Pretreated effluents from two tanneries at Grappenhall are received into the Council's sewer which has improved the condition of the stream previously receiving the drainage, some further details require to be cleared up before all the pollution is removed.

The pollution of the non-tidal section of the Manchester Ship Canal has been reported (*as an important matter*) to the appropriate authority after investigation.

(4) Closet Accommodation

Twenty conversions to the water carriage system were carried out. Where this has been done voluntarily by the owners the Council has, when requested, paid grants up to £10, provided that where a public sewer is not available, the owners will at their own expense connect to a public sewer when it becomes available.

(5) Public Cleansing

This is carried out by the Engineer and Surveyor under direct labour. Disposal is by tipping, *which should be "controlled."* To assist in achieving full controlled tipping, small tips which are used infrequently and which cannot be supervised continually, should be, where possible, discontinued.

In spite of treatments Rocksavage Tip, Clifton, remains heavily rat infested (with some flies) due to the extensive and open tip faces. (First aid treatment is being carried out, e.g., D.D.T., etc.)

The Council have ordered a cesspool emptying vehicle adapted for the collection of night soil, preliminary tests showing that this would enable pail closets to be emptied and the contents disposed of with the minimum of nuisance.

D.D.T. or Gammexane types of insecticide should be used on tips as and when required, especially in warm weather.

6. Sanitary Inspection of the Area

The following tabular statement is furnished by the Senior Sanitary Inspector under Article 27 (18) of the Sanitary Officers' (outside London) Regulations, 1935, or Article 19 of the Sanitary Officers' Order, 1926:—

<i>Nature of Inspections</i>				<i>No. of Inspections</i>	<i>Informal Notices</i>	<i>Statutory Notices</i>
Dwelling Houses (Housing Acts)	....	....		6	—	—
Dwelling Houses (No. of Inmates and queries re Council house applications)	....	....		536	—	—
Dwelling Houses (Public Health Act)				346	203	29
Defects in above.						
(a) Roofs, gutters and rain-water pipes	....			230	99	13
(b) Drains and sanitary fittings	....	....		116	107	10
(c) Other defects	....	....	....	260	160	10
(d) W.C.s and other closets	....	....		70	17	2
Schools	....	....	....	5	3	—
Moveable Dwellings	....	....	....	254	20	—
Water Supplies (Samples)	....	....	....	98	—	—
(Other Inspections)	....	....	....	73	9	—
Closet Conversions	....	....	....	164	10	—

Cesspools and Settling Tanks	....	....	92	27	2
Sewer Connections	....	....	18	—	—
Ditches, Brooks	....	....	32	13	—
Sewers	....	....	50	7	25
Colour Tests (sewers and drains)	....	....	74	—	—
Refuse Collection and Disposal	....	....	36	4	—
Streets, Yards and Passages	....	....	52	26	—
Foul Accumulations	....	....	36	12	—
Tipping on Waste Land	....	....	169	169	—
Vermin (Rats and Mice)	....	....	207	12	—
(Insects)	....	....	60	3	—
Piggeries and keeping of animals	....	....	15	6	—
Dairies and Milk Retailers	....	....	25	—	—
Milk Samples	....	....	82	—	—
Factories and Workshops	....	....	134	18	—
Shops and Foodstores	....	....	118	73	2
Bakehouses	....	....	12	3	—
Meat and Food Inspection	....	....	74	—	—
Canal Boats	....	....	7	—	—
Zymotic Inquiries	....	....	56	—	—
Visits to Contacts and Schools	....	....	40	—	—
Mortuaries	....	....	20	—	—
Petrol Stores	....	....	25	3	—
Hutted Camps	....	....	95	—	—
Miscellaneous	....	....	38	10	—
Sewage Survey of Great Budworth	....	....	80	—	—
Interviews with Builders, Owners and Agents	....	....	167	—	—
Totals			3286	631	58

SHOPS

7. Shops Act, 1950, Food and Drugs Act, 1938

No. employing persons	....	....	126
No. employing members of own family only	....	....	179
			305

Of these Shops :

No. selling food	....	....	232
No. registered under Food and Drugs Act 1938, Section 14)	(1) Manufacture and sale of ice-cream (hot mix, 4; cold mix, 7)	....	11
	(2) Sale only of ice-cream	....	58
	(3) Preparation of preserved foods	....	41

(8) Smoke Abatement

The Council remains a constituent Authority with the Manchester Regional Smoke Abatement Committee and makes a contribution to its fund for providing special Smoke Inspectors.

Action by the appropriate Government Departments in supplying only the proper means of burning good coal, etc., in the house, factory, etc., would go a long way in reducing the nuisance.

Noxious odours were at times noted in the district arising from two large industrial works outside the district, when the wind is in a certain direction, fortunately not the prevailing wind. The matter has been referred to H.M. Alkali Inspector (Factory Inspector). It is hoped this matter will be given urgent attention by all concerned.

(9) Rats and Mice Destruction

The Council operates under direction of the Ministry of Agriculture and Fisheries (Local Authorities circular N.S.19).

The Senior Sanitary Inspector acts as Rodent Officer—one full-time rodent operative is employed. Owing to the death of the rodent operative and resignation of his successor the Council were without an operative for two months. The Council co-operates with the Cheshire Agricultural Executive Committee who carry out rodent destruction on agricultural premises.

Treatment was offered to industrial premises at a charge of cost of labour and materials. Some of these, schools, and two cooking depots, receive treatment as required on this basis—12 others preferred to enter into contracts as before. Dwelling houses receive free treatment unless the infestation is due to lack of hygiene or the unsatisfactory keeping of animals or poultry, in which case a charge is made.

The Council has 19 tips, sewage outfalls and properties which receive treatment as required. The sewer systems in Appleton, Daresbury, Frodsham, Grappenhall, Halton, Hatton, Helsby, Moore, Stockton Heath and Walton, were test baited and infestation was found in Appleton, Frodsham, Grappenhall, Helsby and Stockton Heath to a limited degree. The infested portions received two maintenance treatments.

(10) **FACTORIES ACTS, 1937 and 1948**
Home Office Form 572 (Revised)

1. Inspections for purposes of provisions as to health, including inspections made by Sanitary Inspectors :

<i>Premises</i>	<i>Number on Register</i>	<i>Inspec- tions</i>	<i>Written notices</i>	<i>Occupiers Prosecuted</i>
(i) Factories in which Sections 1, 2, 3, 4, and 6 are to be enforced by Local Authorities.	39	21	1	—
(ii) Factories not included in (i) in which Section 7 is enforced by the Local Authority.	86	44	2	—
(iii) Other premises in which Section 7 is enforced by the Local Authority (excluding outworkers' premises')	9	8	—	—
TOTAL	134	73	3	—

2. Cases in which defects were found

Particulars	Number of cases in which defects were found				Number of cases in which prosecutions were instituted
	Found	Remedied	Referred to H.M. Inspector	by H.M. Inspector	
Want of Cleanliness (S.1.)	6	5	—	1	—
Overcrowding (S.2)	—	—	—	—	—
Unreasonable temperature (S.3)	—	—	—	—	—
Inadequate ventilation (S.4)	—	—	—	—	—
Ineffective drainage of floors (S.6)	—	—	—	—	—
Sanitary Conveniences (S.7)					
(a) insufficient	2	1	—	—	—
(b) Unsuitable or defective	4	4	—	1	—
(c) Not separate for sexes	—	—	—	—	—
Other offences against the act (not including offences relating to Outwork)	6	5	—	—	—
TOTAL	18	15	—	2	—

All factories are entered in the register kept for the purpose. Number of Outworkers—8, employed in the making of wearing apparel. No action taken during the year.

11. Swimming Baths

There are no Public Swimming Baths in the District.

12. Moveable Dwellings

Close supervision was maintained on camping sites and individual moveable dwellings.

The district lacks a suitable camping site at the Stockton Heath end. Much difficulty is experienced by persons siting caravans in unsuitable positions and without having previously obtained planning approval; often those concerned have no other home, the caravan is a poor type unsuitable for permanent occupation and various crude sheds and additions are added.

Applications now require approval under the Town and Country Planning Act, 1947, which gives better control as regards amenity to the district than the Public Health Act. The Council have adopted the recommendations of the County Planning Officer on new camping sites which include the following:—

“The use of the said property as a camping ground shall mean its use as pitches for:—

(i) tents covering an area not exceeding 100 sq. ft. each, or

(ii) caravans on wheels specially built for use as living accommodation and maintained in a fit state to be drawn or propelled on their own wheels on the public highway. No railway carriage, tram-car, omnibus body or other similar article, whether on wheels or not and howsoever adapted, shall be permitted to be stationed or erected on the said property.”

CAMPING SITES

Number of licences in operation, Public Health Act, 1936, Section 269:—

	<i>Year of 1951</i>
(a) For Camping Sites	12
(b) For fixed type dwellings sited on above Camping Sites	8
(c) For other individual moveable dwellings	59
Estimated maximum number of Campers resident in the area at one time, during the summer season, 1951	424

13. Insect Pests

No houses have been found to be infested with bed bugs.

Ants have caused trouble in one locality of dwelling houses; suitable poison was supplied to the householders. It proved effective where used properly.

Other infestations dealt with were wasps' nests affecting a ditch which the Council had to clean, silver fish and cockroaches.

14. Schools

During the year 44 inspections (as allowed by the Public Health Act) of public elementary schools have been made. The water supply is good and adequate, but repairs and improvements are required at many schools. Certain urgent maintenance repairs were asked for and carried out. Automatic flushing of urinals is required in some cases, also attention to dusty, badly surfaced playgrounds; pail closets should be fly-proof.

The County Medical Officer of Health, Cheshire, has reported on schools (in and outside) direct to the Director of Education, C.C.C.

15. Mortuaries

The mortuaries controlled by the Council at Frodsham and Stockton Heath are in a satisfactory condition.

SECTION D—HOUSING

1. New Houses in 1951

Number of new houses erected by Local Authority	53
Number of new houses erected by other bodies and persons	33
TOTAL	86

<i>Parishes</i>	<i>New Houses erected 1951 Total per Parish</i>		<i>No. of inhabited houses in Rural District 31st Dec. 1951.</i>	
	<i>Private</i>	<i>Local Authority</i>		
Alvanley	1	—	85	
Antrobus	—	8	222	
Appleton	26	—	929	
Aston	—	—	72	
Budworth (Great)	—	—	112	
Daresbury	—	—	72	
Dutton	—	6	93	
Frodsham	2	—	1558	
Grappenhall	—	—	1758	
Halton	—	15	445	

Hatton	....	....	....	....	—	—	....	92
Helsby	....	....	....	....	1	10	....	822
Kingsley	....	....	....	....	—	—	....	355
Manley	....	....	....	....	—	—	....	140
Moore	....	....	....	....	—	—	....	156
Norley	....	....	....	....	—	—	....	277
Norton	....	....	....	....	—	—	....	41
Preston Brook	....	....	....	....	1	10	....	122
Stockton Heath	....	....	....	....	2	4	....	2243
Stretton	....	....	....	....	—	—	....	131
Sutton	....	....	....	....	—	—	....	204
Walton	....	....	....	....	—	—	....	510
Whitley	....	....	....	....	—	—	....	167
TOTALS				....	33	53	....	10616

2. Housing

The acute shortage of dwelling houses continues, there being 1,400 applicants for Council houses in the district. The Council is making every effort to build as rapidly as possible. This department has continued to investigate applications for Council houses, where, under the Council's Points Scheme, points are allocated for tuberculosis or other illnesses affected by housing conditions: overcrowding (based on the Overcrowding Act, but excluding one living-room) and the sanitary conditions of the existing accommodation.

Under the Rural Housing Survey, 378 houses were classified suitable for demolition only (Category 4); 1,042 were classified as requiring complete reconditioning (Category 3). In a few cases where owners have carried out extensive repairs, the Council has given undertakings that, provided the houses are maintained in a reasonable state of repair, demolition orders will not be made effective for five to ten years.

Owing to the high cost of repairs, difficulty was experienced in enforcing repairs under the Public Health Acts, especially to the older types of properties, where the controlled rent is low.

3. Emergency Accommodation

The converted ex-army huts at Townfield Lane Camp, Frodsham, comprising eight family units, still provide useful emergency accommodation. Aston Lane Camp, Sutton (17 family units), was taken over at short notice by the military authorities. To assist in rehousing some of these families Red Brow Camp, Preston Brook, was converted into dwelling accommodation by this Department. Seven huts were converted into 10 family units at an average cost of £172. 8s. 8d. each.

4. Housing Act, 1936—Part IV—Overcrowding

		1950	1951
(a)	i. Number of dwellings overcrowded at the end of the year	22	19
	ii. Number of families dwelling therein	30	23
	iii. Number of persons dwelling therein	189	138
(b)	i. Number of new cases of overcrowding reported during the year	1	3
(c)	i. Number of cases of overcrowding relieved during the year	2	6
	ii. Number of persons concerned in such cases	15	35
(d)	i. Particulars of any cases in which dwelling-houses have become overcrowded after the Local Authority has taken steps for the abatement of overcrowding	Nil	Nil

SECTION E**INSPECTION AND SUPERVISION OF FOOD****1. Milk and Dairies**

Numbers on the registers are:—

Dairies	....	....	....	5
Distributors	....	....	....	16
Dealers	....	....	....	9
Supplementary	....	....	....	7

Samples taken were submitted to the Public Health Laboratory, Birkenhead, and comprise the following:—

	No. of samples	No. of samples unsatisfactory
Methylene Blue (keeping quality raw milks)	79	1*
Phosphatase (Heat Treated Pasteurised Milks)	58	1*
Turbidity (Heat Treated Sterilised Milks)	1	—
Of these samples number biological examination for presence of Tubercle Bacilli	17	—
Number found to contain Tubercle Bacilli	1*	

* Necessary action was taken to remedy these

2. Clean Food Byelaws

Inspections were carried out, 77 defects were remedied and advice was given on the correct methods of food hygiene.

3. Ice-cream

The hygiene of premises and personnel was satisfactory. The registrations for the sale only of wrapped ice-cream were markedly increased.

Samples were taken which were graded as follows:—

Grade 1	....	....	....	47
Grade 2	....	....	....	4
Grade 3	....	....	....	0
Grade 4	....	....	....	0

4. Meat and Other Foods

The Sanitary Inspectors act as Meat Inspectors.

During the year, 40 visits were made in respect of Meat and Food Inspections.

No Meat Marketing Scheme under Part III of the Public Health (Meat) Regulations, 1924, is in force in this district.

No slaughter houses were used regularly during the year 1951; animals being slaughtered in the adjoining Urban District of Runcorn.

Post-mortem examination of pigs occasionally slaughtered at farms under Ministry of Food Special Licences has been carried out as required.

The quantity of food condemned during the year was:—

				<i>lbs.</i>
Beef—home killed	....	....	....	175
Ham—imported	....	....	....	417
Bacon	....	....	....	5
Fish	....	....	....	3
Canned meat products....	....	....	....	52
Other canned foods	....	....	....	349
Canned fish products	....	....	....	19
Butter	....	....	....	2
Cheese	....	....	....	13
TOTAL	....	....	....	1035

The question of the amount of imported food condemned has been taken up by the Ministry of Health and Food.

5. Adulteration, etc. Food and Drugs Adulteration Act

I am indebted to the Chief Inspector of the Cheshire County Council for the following report of the work carried out by his department in the Runcorn Rural District under the Food and Drugs Act during the year 1951.

Samples obtained during year ended 31st December, 1951.

<i>Name of Sample</i>	<i>No. obtained</i>	<i>Number adulterated or not up to the recognised standard of quality</i>
Aspirin	1	—
Ainiseed Drops	1	—
Almonds (Ground)	1	—
Adrenaline Cream	1	—
Butter	1	—
Bacon	1	—
Brandy	1	—
Boracic Ointment	2	—
Cheese	1	—
Cooking Fat....	1	—
Coffee	2	—
Chocolate (Hot)	1	—
Codeine Tablets	1	—
Desiccated Coconut	2	—
Eggs	1	—
Epsom Salts	1	—
Fish Paste	1	—
Glycerine	1	—
Honey Mixture	3	—
Ice Cream	6	—
Iodine	1	—
Jelly Crystals	1	—
Milk	44	3
Milk (Condensed)	1	—
Margarine	1	—
Meat Paste	1	—
Pineappleade	1	—
Rum	1	—
Sugar	1	—
Sweets	1	—
Syrup of Figs	1	—
Vinegar	1	—
Whisky	1	—
	<hr/> 86	<hr/> 3

Particulars of Non-Standard Samples

<i>Sample</i>	<i>Result of Analysis</i>	<i>Remarks</i>
1. Milk (Channel Islands)	17.5% deficient in fat	Purchased from a retailer. This pint bottle of milk contained 3.3% of fat whereas Channel Islands Milk must contain 4.0%. Producer (from outside Runcorn R.D.) who supplied the retailer was cautioned.
2. Milk	3.3% deficient in fat	This was a bottle of ordinary milk purchased from the same retailer and produced by the same supplier as No. 1 above.
3. Milk (Channel Islands)	6.2% deficient in fat	Bottle purchased from a retailer. Sample contained 3.75% of fat whereas Channel Islands Milk must contain 4.0%. Producer (from outside Runcorn R.D.) who supplied the retailer was cautioned.

6. Shell-Fish (Molluscan)

There are no Shell-fish beds in the area. Shell-fish are on sale regularly in the district. If Shell-fish, Mussels or Shrimps are eaten locally, they should be well cooked and should come from Government-controlled beds.

7. Watercress

Only that as grown on properly controlled beds with a pure water supply and labelled should be sold and bought, otherwise there is a danger of intestinal disease spreading.

SECTION F PREVALENCE OF AND CONTROL OVER INFECTIOUS AND OTHER DISEASES

The prevailing varieties of notifiable disease during the year were mainly confined to Measles and Whooping Cough.

1. Research

When further research reveals more about the virus causing, e.g., Measles and Whooping Cough, sound curative sera could be made, when the diseases could be controlled and eventually wiped out.

Further research is required into the "carrier" state of many diseases with a view to providing a cure for these, but preventive measures, e.g., Diphtheria Immunisation, Smallpox vaccination, inoculation against Typhoid Fever and other diseases will be necessary for many years where these diseases are likely to occur, or are prevalent; in addition proper hygiene and sanitation are an essential.

2. Diphtheria Immunisation

My Council's *free scheme* was, up to 5th July, 1948, still available so that parents and guardians could have their children *properly* immunised against the deadly disease diphtheria; after this the free scheme continued under control of the Runcorn Divisional Health Committee of the Cheshire County Council.

All children one to fifteen years of age, preferably between the sixth and ninth months, should be properly immunised against diphtheria by two injections; in addition, a "booster" dose (one) is required in five years' time. This can be obtained *free of cost* through the parents' or guardians' own Doctor in the Surgery; also at Welfare Centres and Day Nurseries. Special Clinics are organised at schools as required. Application should be made at the Welfare Centres, Day Nurseries, Schools, or to the Public Health Department (Divisional).

Propaganda on the above has been *continuously* carried out aided by the Press and the Central Council for Health Education, etc, but still some children are found to have not been immunised.

Parents or guardians should face up to their responsibilities and have their children properly immunised at once:

"PREVENTION IS BETTER THAN CURE."

3. Care of the Blind

The welfare of Blind Persons was dealt with by the County Medical Officer of Health, Cheshire, under the provisions of the appropriate Act, working in conjunction with the Blind Welfare Societies, up to 5th July, 1948, and after this the same care continued under Section 28 of the National Health Service Act, 1946 (Divisional Health Committee, etc.).

4. Mental Deficiency and Special Schools for Defective Children

This was dealt with as required by the County Medical Officer of Health, Cheshire, and the appropriate Departments, etc., up to 5th July, 1948; after this further developments were carried out under the appropriate Acts.

5. Ophthalmia Neonatorum

Cases of this disease are notified immediately to the County and local Divisional Medical Officer of Health.

6. Prevention of Disease from Abroad

The Government under the appropriate Acts have a system of medical examination, etc., for those persons arriving in this country from abroad who have been in areas where serious infectious disease has occurred. All contacts are medically examined, given written and verbal instructions what to do if they feel ill, and the local Medical Officer of Health is notified of their arrival and he arranges for the necessary supervision. With the outbreaks of the serious type of smallpox abroad, it is again strongly recommended that all infants and others should be properly vaccinated according to the law on the subject; this can be carried out free of charge through the patient's own doctor.

7. Notifiable Disease (other than Tuberculosis) during the year 1951

The following table includes particulars of the incidence of notifiable diseases in the area during the year 1951:—

<i>Disease</i>	<i>Total Cases Diagnosed</i>	<i>Cases admitted to Hospital</i>	<i>Total Deaths</i>
Meningococcal Infection	2	2	2
*Scarlet Fever	15	3	—
Diphtheria	—	—	—
Erysipelas	4	1	—
Pneumonia (Acute Primary or Influenzal)	32	5	3
Measles	248	1	—
Whooping Cough	119	—	—
Ophthalmia Neonatorum	—	—	—
Puerperal Pyrexia	1	—	—
Anterior Poliomyelitis	1	1	—
Acute Encephalitis	—	—	—
Food Poisoning	—	—	—
Dysentery	5	—	—

* N.B. Scarlet fever—Examination of contacts ? carriers (preventive measures and treatment of these):—

1. Attention to unhealthy throat and nose (e.g., operation for removal of unhealthy tonsils and adenoids and/or penicillin treatment).
2. Cleanliness (N.B., dust) in home, school, etc. (Frequent “spring-clean” and disinfection as required—playgrounds, etc. (*non-dusty*).)
3. Constant attention to *good* hygiene and sanitation *everywhere* by all concerned.

An analysis of the total notified cases under the following age groups is given below:—

<i>Disease</i>	<i>Total Cases at all ages</i>	<i>Under 1</i>	<i>1 to 2</i>	<i>2 to 3</i>	<i>3 to 4</i>	<i>4 to 5</i>	<i>5 to 10</i>	<i>10 to 15</i>	<i>15 to 20</i>	<i>20 to 35</i>	<i>35 to 45</i>	<i>45 to 65</i>	<i>65 and over</i>
Scarlet fever	15	—	—	—	—	2	9	2	1	—	—	—	—
Diphtheria	—	—	—	—	—	—	—	—	—	—	—	—	—
Erysipelas	4	—	—	—	—	—	—	—	—	—	—	3	1
Pneumonia (Acute Primary or Influenzal)	32	—	—	1	—	—	—	—	—	2	3	13	13
Measles	248	8	14	21	45	34	113	9	2	1	1	—	—
Whooping cough	119	5	9	23	16	18	45	2	—	—	1	—	—
Ophthalmia neonatorum	—	—	—	—	—	—	—	—	—	—	—	—	—
Anterior polio-myelitis	1	—	—	—	—	—	—	—	—	—	1	—	—
Puerperal pyrexia	1	—	—	—	—	—	—	—	—	1	—	—	—
Acute encephalitis	—	—	—	—	—	—	—	—	—	—	—	—	—
Food poisoning	—	—	—	—	—	—	—	—	—	—	—	—	—
Dysentery	5	—	—	1	1	—	1	1	—	—	1	—	—
Meningo-coccal Infection	2	1	—	—	—	1	—	—	—	—	—	—	—
TOTALS	427	14	23	46	62	55	168	14	3	4	7	16	14

The Chester and District Hospital Management Committee have informed all general practitioners that they would be responsible for the supply of diphtheria antitoxin (free)—in emergency at the Runcorn Victoria Memorial Hospital (the Matron). In addition it can be obtained at any general hospital. Supplies can also be obtained (in emergency) from any infectious disease hospital, e.g., Warrington and Davenham.

Practitioners may, if they wish, obtain a small stock from a hospital in anticipation of requirements rather than wait until they need it for a particular case. (N.B.)

Stock held by hospitals or practitioners should be returned three months before expiry date for exchange to the source of supply.

In few diseases is prompt treatment as necessary as in diphtheria.

N.B. Antitoxin should be given in all suspicious cases at once, in the home or in the hospital. SWABBING IS ONLY AN AID TO DIAGNOSIS.

This matter is particularly important as the percentage of children properly immunised against diphtheria has fallen during the last year.

Swabs were examined at the Public Health Laboratory, Birkenhead—in addition, as required, the laboratories at Chester and Warrington, free of charge (*this applies to all examinations carried out in the interests of Public Health*).

RUNCORN RURAL DISTRICT

8. Total Deaths, 1951

<i>Cause of Death</i>						<i>Males</i>	<i>Females</i>
All Causes	....	....	....	....	....	250	243
1. Tuberculosis, respiratory	....	....	....	....	....	5	0
2. Tuberculosis, other	....	....	....	....	....	1	0
3. Syphilitic disease	....	....	....	....	....	0	1
4. Diphtheria	....	....	....	....	....	0	0
5. Whooping Cough	....	....	....	....	....	0	0
6. Meningococcal infections	....	....	....	....	....	2	0
7. Acute Poliomyelitis	....	....	....	....	....	0	0
8. Measles	....	....	....	....	....	0	0
9. Other infective and parasitic diseases	....	....	....	....	....	1	0
10. Malignant Neoplasm, stomach	....	....	....	....	....	3	4
11. Malignant Neoplasm, lung, bronchus	....	....	....	....	....	7	2
12. Malignant Neoplasm, breast	....	....	....	....	....	0	6
13. Malignant Neoplasm, uterus	....	....	....	....	....	0	4
14. Other malignant and lymphatic Neoplasms	....	....	....	....	....	25	14
15. Leukaemia, aleukaemia	....	....	....	....	....	1	1
16. Diabetes	....	....	....	....	....	1	0
17. Vascular lesions of nervous system	....	....	....	....	....	24	41
18. Coronary disease, angina	....	....	....	....	....	40	18
19. Hypertension with heart disease	....	....	....	....	....	10	9
20. Other heart disease	....	....	....	....	....	29	56
21. Other circulatory disease	....	....	....	....	....	13	17
22. Influenza	....	....	....	....	....	14	8
23. Pneumonia (broncho)	....	....	....	....	....	10	7
24. Bronchitis	....	....	....	....	....	16	7
25. Other diseases of respiratory system	....	....	....	....	....	0	1
26. Ulcer of stomach and duodenum	....	....	....	....	....	5	1
27. Gastritis, enteritis and diarrhoea	....	....	....	....	....	1	1
28. Nephritis and nephrosis	....	....	....	....	....	4	3
29. Hyperplasia of prostate	....	....	....	....	....	1	0
30. Pregnancy, childbirth, abortion	....	....	....	....	....	0	0
31. Congenital malformations	....	....	....	....	....	0	2
32. Other defined and ill-defined diseases	....	....	....	....	....	23	32
33. Motor vehicle accidents	....	....	....	....	....	2	1
34. All other accidents	....	....	....	....	....	9	3
35. Suicide	....	....	....	....	....	3	3
36. Homicide and operations of war	....	....	....	....	....	0	1

				Males	Females
Deaths of Infants under 1 year	Total	....	....	14	10
	Legitimate	....	....	14	10
	Illegitimate	....	....	0	0
Live Births	Total	....	....	246	245
	Legitimate	....	....	236	240
	Illegitimate	....	....	10	5
Stillbirths	Total	....	....	5	3
	Legitimate	....	....	4	3
	Illegitimate	....	....	1	0

POPULATION.....35,510 (estimated mid-year Home Population)
Comparability Factors.....Births 1.03; Deaths 0.94

BIRTH RATES, DEATH RATES, ANALYSIS OF MORTALITY,
MATERNAL MORTALITY AND CASE RATES FOR
CERTAIN INFECTIOUS DISEASES IN THE YEAR 1951
Provisional figures based on Quarterly Returns

	Runcorn Rural District	England and Wales	126 County Boroughs and Great Towns (including London)	148 Smaller Towns (Resident Population 25,000 to 50,000 at 1931 Census)	London Adminis- trative County
Rates per 1,000 home population					
BIRTHS—					
Live births	13.83	15.50	17.30	16.70	17.80
Stillbirths	16.29	0.36	0.45	0.38	0.37
DEATHS—					
All causes	13.89	12.50	13.40	12.50	13.10
Typhoid and Paratyphoid	0.00	0.00	0.00	0.00	0.00
Whooping Cough	0.00	0.01	0.01	0.01	0.01
Diphtheria	0.00	0.00	0.00	0.00	0.00
Tuberculosis	0.17	0.31	0.37	0.31	0.38
Influenza	0.62	0.38	0.36	0.38	0.23
Smallpox	0.00	0.00	0.00	0.00	0.00
Acute Poliomyelitis (includ- ing Polioencephalitis)	0.00	0.00	0.01	0.01	0.00
Pneumonia	0.48	0.61	0.65	0.63	0.61
NOTIFICATIONS (corrected)					
Typhoid Fever	0.00	0.00	0.00	0.00	0.01
Paratyphoid Fever	0.00	0.02	0.03	0.02	0.01
Meningococcal Infection	0.06	0.03	0.04	0.03	0.03
Scarlet Fever	0.42	1.11	1.20	1.20	1.10
Whooping Cough	3.35	3.87	3.62	4.00	3.11
Diphtheria	0.00	0.02	0.02	0.03	0.01
Erysipelas	0.11	0.14	0.15	0.12	0.15
Smallpox	0.00	0.00	0.00	0.00	0.00
Measles	6.98	14.07	13.93	14.82	14.64
Pneumonia	0.90	0.99	1.04	0.96	0.72
Acute Poliomyelitis (includ- ing Polioencephalitis):					
Paralytic	0.01	0.03	0.03	0.03	0.02
Non-paralytic	0.00	0.02	0.02	0.03	0.02
Food Poisoning	0.00	0.13	0.15	0.08	0.23
Rates per 1,000 Live Births					
DEATHS—					
All causes under 1 year of age	48.88	29.60 (a)	33.90	27.60	26.40
Enteritis and diarrhoea under 2 years of age	0.00	1.40	1.60	1.00	0.70
NOTIFICATIONS (corrected)					
Puerperal Fever and Pyrexia	2.03	Rates per 1,000 Total (Live and Still) Births. 10.66 | 13.77 | 8.08 | 14.90			

(a) Per 1,000 related live births.

MATERNAL MORTALITY IN ENGLAND AND WALES

Intermediate List No. and Cause		Number of Deaths	Rates per 1,000 Total (Live and Still) Births	Rates per million women aged 15-44
A115	Sepsis of pregnancy, childbirth and the puerperium	70	0.10	
A116	{ Abortion with toxæmia	3	0.00	
	{ Other toxæmias of pregnancy and the puerperium	167	0.24	
A117	Haemorrhage of pregnancy and childbirth	91	0.13	
A118	Abortion without mention of sepsis or toxæmia	37	0.05	4
A119	Abortion with sepsis	66	0.09	7
A120	Other complications of pregnancy, childbirth and the puerperium	125	0.18	

9. Tuberculosis

No person employed in the milk trade was found suffering from Pulmonary Tuberculosis, nor was it found necessary compulsorily to remove to hospital any person suffering from Tuberculosis.

For the prevention of this disease, the following precautions should be noted:—

A properly balanced diet, in addition early diagnosis (X-ray, etc.), proper treatment, *thorough* disinfection of homes when cases go to a sanatorium, separate rooms and utensils, frequent visits by Health Visitors, and as required by the Medical Officer of Health and Sanitary Inspectors. All new cases are specially investigated by me and reported to me as Divisional Medical Officer of Health (as required to H.M. Inspector of Factories). Close liaison is kept with the Chest Physicians. Follow-up of contacts and the patients by the Health Visitor is carried out very thoroughly and action taken as required by myself and the Chest Physician (Divisional Health). The Mass X-ray Units are proving useful in detecting early cases of Tuberculosis, etc.

Medical officers in charge of industrial hygiene, etc., factory inspectors, form a valuable liaison in preventing and ascertaining the cause of tuberculosis (e.g., dust, working conditions, disinfections, cleanliness, etc.). The Public Health Act, 1936 (section 287) proves useful to the Medical Officer of Health (and Sanitary Inspectors) allowing power of entry to any premises for the general purpose of the Act, in conjunction with those concerned.

In my opinion, all milk, especially for children, should be properly heat-treated (e.g., pasteurised or sterilised); failing this, heat-treated in the home.

With proper veterinary control of cattle, proper housing conditions and food for the people, these, with heat-treatment of milk (e.g., pasteurisation, etc., or proper heat-treatment in the home), will help to stamp out this terrible disease. Proper heat-treatment of milk not only kills tubercle bacillus but other germs causing disease.

A thorough disinfection (steam, etc.) of the house, clothing, etc., with a *thorough* "spring-clean" of the house when a case is admitted to a sanatorium or hospital, *is essential*. Isolation of contacts (*especially* children) is most essential and every endeavour is made to do this. B.C.G. injections are given by the Chest Physician in suitable cases. Chalets, extra beds and bedding are supplied as and when required, via the Divisional Health Department.

Particulars of the 23 new cases of tuberculosis and of the 6 deaths from the disease in the area during 1951:—

Age Periods	New Cases				Deaths			
	Respiratory		Non-Respiratory		Respiratory		Non Respiratory	
	M.	F.	M.	F.	M.	F.	M.	F.
0-1	—	—	—	—	—	—	—	—
1-4	—	—	—	1	—	—	—	—
4-14	—	—	1	—	—	—	1	—
15-24	2	1 (3)	—	—	—	—	—	—
25-34	1 (2)	(2)	—	—	—	—	—	—
35-44	1	3	—	—	1	—	—	—
45-54	—	1	—	—	—	—	—	—
55-64	2	—	—	—	1	—	—	—
65 upwards	1	2	—	—	3	—	—	—
TOTALS	9	12	1	1	5	—	1	—

3 Deaths were Notified Cases.

Figures in brackets relate to cases transferred from another district

Specimens of sputum from suspected Pulmonary Tuberculosis patients are examined at the Public Health Laboratory, Birkenhead, also Warrington and Chester Royal Infirmary laboratories.

Tuberculosis cases on register. Comparative rates:—

Year	Estimated Population	Pulmonary		Non-Pulmonary		Total all Forms	No. per 1,000 of Population
		M.	F.	M.	F.		
1942	—	67	47	31	43	188	
1943	—	66	49	31	42	188	
1944	—	65	53	37	47	202	
1945	31,710	71	53	32	41	197	6.21
1946	32,760	68	44	34	34	180	5.49
1947	32,930	60	42	29	32	163	4.95
1948	34,230	59	44	28	33	164	4.79
1949	34,550	62	37	31	34	164	4.74
1950	35,580	74	48	29	35	186	5.22
1951	35,510	79	55	25	34	193	5.43

10. Classified Table of Cancer Deaths

	AGE	-30		30-50		50-70		over		Total
		M.	F.	M.	F.	M.	F.	M.	F.	
Bladder		-	-	-	-	1	-	1	-	2
Breast		-	-	-	1	-	2	-	1	4
Genital Organs:										
Prostate		-	-	-	-	2	-	2	-	4
Uterus		-	-	-	-	-	1	-	-	1
Liver		-	-	-	1	3	2	1	-	7
Kidney		-	-	-	-	1	-	-	-	1
Lungs		-	-	1	-	6	-	-	2	9
Neck		-	-	-	-	-	-	-	-	-
Rectum		-	-	-	-	4	-	4	1	9
Remainder of Intestinal Tract:										
Oesophagus		-	-	-	1	-	-	-	-	1
Colon		-	-	-	1	-	1	-	2	4
Stomach		-	-	-	-	-	3	3	-	6
Throat and Mouth		-	-	-	-	2	1	1	-	4
Cancer of all other sites....		-	-	-	1	3	7	-	2	13
Male Deaths		-	-	1	-	22	-	12	-	35
Female Deaths		-	-	-	5	-	17	-	8	30

The 65 deaths from cancer give a rate of 1.83 per 1,000 of population, or 13.2% of total number (493) deaths reported during year.

11. Cancer

Under Section 76 of the National Health Service Act, 1946, Sections 1, 2 and 6 and sub-sections (2) and (3) of Section 8 of the Cancer Act, 1939, were repealed and the responsibility for the provision of an adequate cancer service was placed on the Minister and Regional Hospital Boards by Part II of the National Health Service Act of 1946.

Facilities for cancer diagnosis and treatment are available in all major general hospitals in the area and the radiotherapeutic work of the region is centred at the Liverpool Radium Institute. Follow-up clinics are undertaken at the Chester Royal Infirmary.

The areas of the Runcorn Rural District Council and the Runcorn Urban District Council are within the area of the Liverpool Regional Hospital Board.

ANNUAL REPORT OF CANAL BOAT INSPECTOR 1951

In accordance with Section 249 (3) of the Public Health Act, 1936, I beg to report as follows:—

Six Canal boats were inspected during the year 1951 at the Stockton Heath, Preston Brook and Norton Quays.

There were no contraventions and no infectious diseases were reported on the Boats whilst they were in our area. In this district few boats tied up at the wharves since canal transport was to a large extent superseded by road transport.

The number of persons occupying the boats inspected were:—
Males, 8; Females, 1; Children, 1; Total (net) adults, 9.

The number allowed by the Certificates was 22.

IMPORTANT

THE COMMON SENSE PREVENTIVE MEASURES AGAINST DISEASE

- (1) **CLEANLINESS.** (a) This **must** be thorough in or around the house, kitchen, shop, larder, etc. (This also applies to feeding bottles and teats.)

WHY? Where these are **absolutely** clean there are few, if any, disease germs. Feeding bottles and teats **must** be thoroughly washed and boiled prior to use. If in doubt ask your Public Health Department, Welfare Centre, Health Visitor, or District Nurse.

(b) This also applies to those who handle and cook food, especially the hands and nails.

WHY? Dirt (with disease germs) may be on the hands or **under the nails** and so spread disease germs to food; **always** thoroughly wash the hands and **clean under the nails** after using the lavatory.

- (2) **DESTRUCTION OF FLIES, RATS AND MICE.**

(a) **FLIES:** Any dirt, faeces, manure, etc., **in which flies breed** must be disposed of quickly and thoroughly (burying and **well covering** these with earth is one of the best ways). Flies should be destroyed by, e.g., fly sprays, fly swats, fly papers, etc., and food larders, pail closets, and bins **must** be fly proof. Food **must** be protected from dust, dirt, flies, rats and mice, and kept in a cool well ventilated place. Disinfectant solution **must** be used to cover contents in pail closets.

WHY? Flies **carry** disease germs (in and on their bodies) from all kinds of dirt to food, and so spread diseases.

(b) **RATS AND MICE:** For the destruction of these ask your chemist; failing this your Sanitary Inspector (who is also the Rodent Officer).

WHY? Rats and mice breed in all kinds of dirt, and like flies carry disease germs to food (and water).

- (3) **FOOD** should be **properly** heat treated; this applies especially to the manufacture of ice cream, the cooking of shell-fish, and the pasteurisation and sterilization of milk. Where milk is not pasteurised or sterilized I recommend that this is boiled at home.

WHY? By proper heat treatment, any disease germs present are destroyed. This applies to all kinds of food, including ice cream, shell-fish and milk.

- (4) **WATERCRESS** must be obtained from properly controlled beds, that is, where pure water is supplied; **this with lettuce and fruits** without a fairly thick outside coat, should be thoroughly washed in a weak Condyl's solution and then rinsed with pure water before being eaten.

WHY? Watercress can carry disease germs on it; this also applies to lettuce and fruit.

- (5) **DRIED EGGS AND DRIED MILK** must be kept in a cool place, and when the package is opened it should be used up quickly.

WHY? These are good foods, but if the containers are left open to the air too long (e.g., over two days) germs can grow in them and so spread disease.

- (6) **ALL WATER FOR DRINKING, DIETETIC OR DAIRY PURPOSES** should be from a pure supply; if in doubt as to its purity, boil it well for small quantities, or chlorinate it for large quantities—see instructions on bottles obtainable from most chemists. **Do not bathe in rivers**, etc., which may be sewage polluted.

WHY? Water, if impure, can have disease germs in it; boiling or chlorination kills disease germs. If you bathe in rivers, canals, etc., which may be sewage polluted, you may swallow disease germs.

- (7) **CONSTIPATION.** This *must* be avoided, for example, by eating sufficient roughage food, e.g., whole-meal bread and vegetables also by keeping the stomach muscles strong and healthy by games and P.T. exercises. If in doubt see your own doctor.

WHY? If constipated foul matter remains too long in the lower bowel so poisoning the blood and also holding disease germs in the bowel which may infect the body. Many diseases might be traced to chronic constipation.

- (8) **TO AVOID SPREADING “COLDS IN THE HEAD”, INFLUENZA**, etc. Use a handkerchief when you cough or sneeze.

WHY? A handkerchief acts as a screen and so catches disease germs from the nose and throat. Disinfect and boil handkerchiefs well prior to washing. Wet feet, wet clothes, and draughts cause chilling of the body and so render it more liable to disease.

- (9) **PROTECTIVE INJECTIONS AGAINST DIPHTHERIA, SMALL-POX**, etc. See that all (especially young children) have these as required.

WHY? By these injections the body is more fully protected against dangerous diseases. If in doubt ask your own doctor, Medical Officer of Health, Welfare Centre, Health Visitor, or District Nurse.

- (10) **PROPER DISINFECTION OF HOUSES**, etc. After any serious disease in a house, etc., see that this is carried out (ask your Public Health Department, Sanitary Inspector), **also a thorough “spring-clean”**. The latter would be sufficient in less serious diseases such as influenza, measles and whooping cough.

WHY? By this disease germs are destroyed or washed away and so cannot infect others.

- (11) **ISOLATION OF CONTACTS OF INFECTIOUS DISEASE.** Carry out thoroughly what is recommended on the special pamphlet issued by the Medical Officer of Health when patients are sent to hospital or nursed at home. This applies also to any *sick* animals (indoor or outdoor); if in doubt call in a veterinary officer.

WHY? By so doing disease germs are less likely to spread. If in doubt ask your own doctor or Public Health Department (e.g., your Sanitary Inspector).

- (12) **DEFECTIVE TEETH.** See your dentist if your teeth are bad or septic; better still see him as a routine every six months.

WHY? If your teeth are bad or septic the chewing powers are not good and so all kinds of indigestion may arise. Septic teeth (and gums) lead to poisoning of the blood and so to various diseases.

(13) **THE PREVENTIVE FOODS.** Eat some of these daily in your daily diet, which **must** be properly cooked, varied, **and** flavoured.

WHY? The preventive foods (i.e., those which help the body to prevent disease) are:—

Milk and eggs (dried or ordinary);

Cheese;

Fresh vegetables and fruit (cooked or in salads);

Animal fats, e.g., fish (especially herrings), and butter;

Margarine (vitaminised).

These all contain valuable substances called **vitamins** which are **essential** to good health. If in doubt ask, e.g., your Health Visitor or School Teacher, failing this your doctor.

When the above cannot be obtained, various additional vitamins, e.g., rose hip juice (vitamin C), vitamin C tablets, wheatgerm (vitamin B), cod and halibut liver oil (vitamins A and D) and other vitamins can be obtained from your own doctor if he agrees these are required. They can also be bought at the various chemists and shops. Without the proper amount of vitamins taken daily, the body is more open to attack by disease germs.

GENERAL

- (1) Anyone feeling ill should see their own doctor (better still, as a routine, see him once a year)—though with the above common-sense precautions there should be little danger of contacting or spreading disease.
- (2) **ASK FOR MORE OF THESE PAMPHLETS AS REQUIRED FROM YOUR MEDICAL OFFICER OF HEALTH.** Have discussion groups, lectures and films on health education. Attend the official classes on personal hygiene given by, e.g., the Red Cross Society, St. John Association, Scouts and Girl Guides—these organisations have excellent little books on the subject. Always carry out these common-sense preventive measures and *tell others about them*.
- (3) Good health mostly depends on YOU—your co-operation is essential.

“WHERE THERE IS DIRT THERE IS DISEASE”

E. N. HILLMAN GRAY, L.R.C.P.&S., L.M., D.P.H.

Medical Officer of Health, Runcorn Urban & Rural Districts
Divisional Medical Officer and School Medical Officer.

PUBLIC HEALTH DEPARTMENTS:

1. Town Hall, Runcorn.
2. Castle Park, Frodsham.

N.B. PLEASE KEEP THIS PAMPHLET FOR EASY REFERENCE

Appendix “ B ”

CHESHIRE COUNTY COUNCIL

RUNCORN DIVISIONAL HEALTH COMMITTEE

REPORT
FOR THE YEAR
1951

By the

DIVISIONAL MEDICAL OFFICER OF HEALTH

Presented to the
Runcorn Divisional Health Committee
18th March, 1952

MEMBERS OF THE RUNCORN DIVISIONAL HEALTH COMMITTEE

Chairman:
COUNCILLOR J. HUNT, J.P.

Deputy Chairman:
COUNCILLOR H. HUGHES, C.C., J.P.

Representatives of Local Health Authority

County Councillor G. ASTBURY, J.P. (Chairman, County Health Committee)
„ Dr. W. N. LEAK (Vice-Chairman, County Health Committee)
Alderman W. A. GIBSON, J.P.
„ W. GITTINS, J.P.
County Councillor A. E. MOORS
„ J. D. WHITLEY

Runcorn Rural District Council Representatives

Councillor Mrs. E. STANSFIELD, J.P.	Councillor G. S. WALLWORTH, J.P.
„ J. A. HUTCHINSON	„ E. G. WHITE
„ H. JACKSON	„ C. WILKINSON
„ W. S. LOOKER	„ G. WILLIAMS

Runcorn Urban District Council Representatives

Councillor E. C. BROOKER, J.P.	Councillor T. B. SHALLCROSS
„ H. GOODALL	„ T. WHITBY, J.P.
„ C. POSNETT, C.C.	„ A. WOOD
„ F. Ratcliffe	

Co-opted Members

Mr. W. H. STUBBS, Chester and District Hospital Management Committee
Mr. A. JONES, Runcorn Divisional Executive for Education
Dr. C. E. W. BOWER, Local Medical Committees for the County Palatine of Chester
Dr. E. WARDLE, National Health Service, Local Dental Committees
Mrs. W. HILL, Cheshire County Nursing Association
Mrs. C. EVANS
Mr. E. EARLAM
Mr. W. RICHARDSON

Officers

Clerk to the Committee: Mr. T. J. Lewis

Divisional Medical Officer: E. N. Hillman Gray, L.R.C.P. & S., L.M., D.P.H.

**CHESHIRE COUNTY COUNCIL
RUNCORN DIVISIONAL HEALTH COMMITTEE**

**ANNUAL REPORT OF THE
DIVISIONAL MEDICAL OFFICER OF HEALTH
FOR THE YEAR 1951**

INTRODUCTION

TO THE CHAIRMAN AND MEMBERS OF THE
RUNCORN DIVISIONAL HEALTH COMMITTEE

Mr. Chairman, Ladies and Gentlemen,

I have the honour to present this my Annual Report dealing with those portions of the Sections of Part III of the National Health Act, 1946, for which this Committee is responsible.

The report is sub-divided into the various sections of the Act and gives details of the work carried out during the year.

Child Welfare.—In connection with child welfare, in addition to the official welfare centres, day nursery, etc., available for all concerned, there are many representative voluntary organisations concerned with this very important subject—for further information enquiries should be made at the Divisional Health Department.

Family Planning Association (for marriage guidance, etc.—strongly recommended).—Some of the voluntary clinics in the north are, e.g.:—

†LIVERPOOL MOTHERS' WELFARE CLINIC, 9 Cambier Terrace, Liverpool, 1.—Wednesdays, Thursdays and Fridays, 2 to 3 p.m.

BRANCH CLINICS:—

*†Liverpool, 4.—294 Netherfield Road. Thursdays, 10.30 to 11.30 a.m.

*†Liverpool, 11.—Community Council Hall, Townsend Avenue. Monday, 2 to 3 p.m.

*†Liverpool, 21.—Linacre Methodist Mission, Linacre Road, Litherland. Fridays, 2 to 3 p.m.

At clinics marked * every patient is seen by a doctor.

At clinics marked † pre-marriage advice is given.

Smallpox.—Owing to the danger of serious cases of smallpox arriving in this country from abroad, all concerned are advised they should be vaccinated.

Immunisation.—*Diphtheria immunisation* proves again and again everywhere in the world its wonderful powers to prevent this deadly disease; *all children*, preferably between the sixth and ninth months, must be properly immunised, with a further dose in just under five years' time; this can be obtained free of cost under the Divisional Health Committee Scheme from their own doctors or at the welfare centre, day nursery or school.

PREVENTION IS BETTER THAN CURE.

From the number of notifications received during the year for children who had been vaccinated against smallpox and immunised against diphtheria, it is noted that there was an increase over the previous year in the percentage of children so protected, but the figures are still well below the very good percentage that was maintained during the latter years of the war. Remarks on this serious aspect of preventive medicine are made later in my report.

Every endeavour will be made to ensure that the high percentage of children vaccinated and immunised in the past is maintained in future years.

Ambulance and Transport Service

The temporary ambulance and transport service has continued during the year, and for a temporary service this has worked satisfactorily. The Cheshire County Council hope to establish a permanent Ambulance and Transport Service as soon as possible.

Prevention of Illness, Care and After-care

In connection with the prevention of illness, care and after-care, much work has been carried out during the year, especially with tuberculosis patients. All cases on the registers have been visited by the health visitors, and up-to-date report sheets completed. The care and after-care of these patients, and also other cases of illness, will be further pursued.

Accidents.—Insufficient attention is given to the prevention of accidents, especially in young persons, which could be avoided by common-sense methods; voluntary societies and school authorities can help in this important matter with suitable lectures and discussion groups at frequent intervals. The Citizens' Advice Bureaux (Chester and Warrington) can advise where specialist lectures can be obtained.

Research.—Further medical and veterinary research (in addition, research on the virus diseases in plants, animals, etc.) may solve the question of the cause and spread of the diseases caused by viruses; especially the serious disease anterior poliomyelitis (infantile paralysis).

Intensive research is being carried out by the Ministry of Health to ascertain whether german measles (rubella) occurring in pregnant women may cause malformations, etc., in the new-born. (It is interesting to note that most tropical diseases have a cure, *due mostly to intensive research*, i.e., find the cause.) Research *must* proceed “behind the scenes” so that the cause and eventually the prevention and cure of all diseases will result. Further facilities in the investigation of infectious disease and disease generally is recommended, e.g., by pathological *overhauls*. A *FULL* examination of the blood is “a mirror of the health” of the individual and is insisted on by, e.g., some insurance companies in the United States.

Health Education

A pamphlet on the “*Commonsense Preventive Measures Against Disease*” is issued as required to all concerned via voluntary societies, health visitors, district nurses, midwives, and sanitary inspectors; it has proved most useful and instructive, especially where discussion groups, lectures, etc., have been arranged on the subject. (See Appendices to Annual Reports Runcorn Urban District Council and Runcorn Rural District Council, 1951.)

Hostel Accommodation (e.g., for elderly persons who can look after themselves) and **Convalescent Treatment** (N.B., children), can be arranged for through the Divisional Medical Officer of Health where beds are available and parents or guardians are prepared to pay a weekly amount based on an official “means test”.

A close liaison has been kept with doctors, consultant chest physicians, health visitors and district nurses in the day-to-day administration of the various sections of the Act, and I am most grateful for the help they have afforded me at all times.

Domestic Help Service

The Domestic Help Service is being used more and more each year, especially in cases of old people living on their own where they are unable to keep their homes clean. In each case an enquiry is made as to whether relations can help, or someone could be asked to live in, so helping the housing shortage, and only where a help is essential is this optional service granted, and then only on a “means test”.

The National Assistance Board has been called in as and when required.

My thanks are due to the Chairman and Members of the Divisional Health Committee for their support and help to me on all occasions.

The co-operation and assistance of the County Medical Officer and his staff, the Clerk to the Divisional Health Committee, and also

the staff of my Divisional Health Office, have been greatly appreciated by me in the carrying out of my various duties.

I beg to remain,

Town Hall, Runcorn

Your obedient Servant,

12th March, 1952

E. N. HILLMAN GRAY

SECTION 22

CARE OF MOTHERS AND YOUNG CHILDREN

There are seven Welfare Centres in the Division, as follows:—

ANTROBUS — A Child Welfare Clinic is held at the Parish Hall on the first and third Wednesday of each month at 2.0 p.m.

FRODSHAM — The Child Welfare Clinic is held on alternate Tuesdays at the Trinity Church House, The Rock, Frodsham, at 2.0 p.m.

In addition, Ear, Nose and Throat, Visual and Minor Ailments Clinics are also held at this Centre during the month.

In November work commenced on the alterations of the Chapel-on-the-Rock, Frodsham, for a new Welfare Centre for this area, and it is hoped the work will be completed early in 1952.

GRAPPENHALL — A Child Welfare Clinic is held at the Methodist Sunday School each Tuesday at 2.0 p.m.

HELSEBY — The Child Welfare Clinic for this district is held at the British Insulated Callenders Cable Works Recreation Room, Helsby, on alternate Tuesdays at 2.0 p.m.

KINGSLEY — During the year arrangements were made for opening a Child Welfare Clinic for Kingsley and district, and on the 13th June, 1951, this was opened at the Hurst Chapel, Kingsley.

The Clinic is held on the second and fourth Wednesdays of each month at 2.0 p.m.

RUNCORN — The Child Welfare Clinic at this Centre is held at the Welfare Centre, 29 High Street, Runcorn, each Wednesday at 10.0 a.m. and 2.0 p.m.

Clinics for the following are also held during the month at this Centre:—Ante-natal; Post-natal; Minor Ailments; School; Orthopaedic; Physiotherapist; Speech Therapy; Toddlers; and Visual.

Work commenced in November on the conversion of “Aulderwood” and “Rydal Mount”, Halton Road, Runcorn, for a new all-purposes Welfare Centre for Runcorn, and it is hoped that this will be ready for occupation at a date in 1952.

On the 1st September, 1951, arrangements were made for the purchase and sale of welfare foods at the Antrobus, Kingsley and Runcorn Centres to be carried out through my office. At the other Welfare Centres the purchase and sale of welfare foods is carried out by voluntary committees.

There is one Day Nursery in the Division, situated in Okell Street, Runcorn.

During the year the Committee inspected the Welfare Centres at Frodsham, Runcorn and Stockton Heath, and the Day Nursery, Runcorn, and attention was given to alterations, repairs and replacements required.

During the year I also made periodic visits to all Welfare Centres in the Division and to the Day Nursery, and any items requiring attention were referred to the Committee for their consideration.

Work did not commence during the year on the provision of drying cupboard, cot store and milk room, and alterations to pram shed at the Day Nursery, which were agreed to by the Committee during the previous year, but the contract has been signed and it is hoped that work will commence early in 1952.

Attendances at the various clinics held at the Welfare Centres and for the Day Nursery, are given in the following tables:—

A. MOTHERS' CLINIC					<i>New Cases</i>	<i>Total Attendances</i>
Ante-natal	....	....	....	....	236	960
Post-natal	....	....	....	....	3	4
Dental:—						
Pre-natal	....	....	....	....	5	5
Nursing mothers	....	....	....	....	7	11
Dentures supplied	....	....	....	....	—	—

B. YOUNG CHILDREN'S CLINICS								
(i) <i>Infant welfare</i>					<i>New Cases</i>		<i>Total Attendances</i>	
To 1 year	....	....	....	....	636		7000	
1 to 5 years	....	....	....	....	146		2667	
(ii) <i>Specialist</i>								
Ophthalmic	....	....	....	....	15		87	
Dental treatment (under 5)	....	....	....	....	59		61	
E.N.T. (under 5)	....	....	....	....	1		1	

B. (i) Welfare Centres					<i>New Cases</i>		<i>Total Attendances</i>	
					<i>0-1</i>	<i>1-5</i>	<i>0-1</i>	<i>1-5</i>
Antrobus	....	....	....	....	23	16	236	261
Frodsham	....	....	....	....	65	7	565	293
Grappenhall	....	....	....	....	114	8	1877	516
Helsby	....	....	....	....	40	3	586	375
Kingsley	....	....	....	....	33	17	136	63
Runcorn	....	....	....	....	243	78	2174	569
Stockton Heath	....	....	....	....	118	17	1426	590
Totals	....	....	....	....	636	146	7000	2667

B. (ii) Ophthalmic Clinics

						<i>New Cases</i>		<i>Total Attendances</i>
Frodsham	....	....	....	....	....	5	....	25
Runcorn	....	....	....	....	....	4	....	32
Stockton Heath	....	....	....	....	....	6	....	30
Totals	....	....	....	....	....	15	....	87

E.N.T. Clinic

						<i>New Cases</i>		<i>Total Attendance</i>
Frodsham	....	....	....	....	....	1	....	1
Stockton Heath	....	....	....	....	....	—	....	—
Totals	....	....	....	....	....	1	....	1

(iii) Day Nursery, Runcorn

						<i>Average No. Attending</i>		<i>Total Attendances</i>
Age 0–2 years	....	....	....	....	....	9	....	2184
2–5 years	....	....	....	....	....	26	....	6429

SECTION 23 — MIDWIFERY

Under this section the Committee are responsible for:—

- (i) Provision, where necessary, of accommodation for midwives and the maintenance, repair and alterations required for such premises.
- (ii) Provision of transport for midwives when necessary in cases of emergency.

No. 10 Stanley Villas, Runcorn, is the only County-owned property in the Division used for the accommodation of County midwives. During the year the Health Visitor occupying the first-floor flat at these premises resigned, and a new midwife who had been appointed for Runcorn, was accommodated in this flat. Both the flats are now occupied by County midwives.

All other County midwives in the Division reside in property under arrangements made by themselves, and for which this Committee have no responsibilities with regard to repairs, etc.

During the year the Committee inspected No. 10 Stanley Villas, Runcorn, and any repairs requiring attention were dealt with.

Transport and medical requisites were provided as and when
d .

SECTION 24 — HEALTH VISITING

The Committee are also responsible for housing accommodation for Health Visitors, but during the year all Health Visitors in the Division resided in property under arrangements made by themselves, and for which this Committee have no responsibility with regard to repairs, etc.

SECTION 25 — HOME NURSING

All District Nurses, with the exception of the District Nurse for Stockton Heath, reside in county-owned or rented property.

The Stockton Heath District Nurse is living in rooms and numerous enquiries were made with a view to finding suitable accommodation, but without success.

The District Nurse for Stockton Heath resigned her appointment on 19th September, 1951, and a new District Nurse was appointed and commenced duties on the 1st October, 1951. She accepted the appointment on condition that she was only expected to reside in rooms for a short period. The General Purposes Subcommittee inspected a property at Stockton Heath that had come to their notice, but this was found unsuitable for occupation of the District Nurse, and the Committee recommended that the Runcorn Rural District Council be again approached with a view to them allocating a prefabricated bungalow to the County Council for occupation of the District Nurse until such time as the house to be built by the County Council was completed.

During the year negotiations continued regarding the purchase of a plot of land in Fairfield Gardens, Stockton Heath, which the Committee had recommended should be purchased for the erection thereon of a house for this District Nurse, but by the end of the year no agreement had been reached.

The Committee inspected all properties in the Division occupied by District Nurses and District Nurse/Midwives, and action was taken regarding any alterations, repairs or renewals requiring attention.

Work was commenced during the year on the extensive alterations to the Nurse's Home, Delph Cottage, Daresbury, and the repairs, painting and decorating at the Nurse's Home, 47 Main Street, Halton, were completed.

SECTION 26 — VACCINATION AND IMMUNISATION

I am pleased to be able to report that during the year under review there has been an increase in the number of vaccinations and immunisations carried out in the Division.

The percentage of children under 5 years immunised against diphtheria has risen from 52% in 1950 to 64% for 1951, and although it is pleasing to be able to report this increase, it must be pointed out that this figure is well below the percentage of children in this age group who were protected against this deadly disease during the latter years of the war.

The percentage of children under 1 year vaccinated against smallpox increased from 32% in 1950 to 48% for 1951—this percentage should be much higher.

A register is maintained of all births in the Division and if no record is received that a child has been vaccinated at the age of 6 months, a letter is sent to the parents strongly advising them to have their child vaccinated. A similar course is also taken regarding immunisation when the child is one year of age, in the case of those in whom immunity has not been carried out at 6-9 months.

During the year a number of Immunisation Clinics were arranged at schools in the Division; 77 children being given primary injections and 775 reinforcing injections. There was an increase in the number of reinforcing injections given in the Division from 70 in 1950 to 961 for 1951.

Whooping cough vaccine (alone or combined with anti-diphtheria) was used in the Division by certain doctors.

The following table shows the number of vaccinations and immunisations carried out during the year, and also, for comparison purposes, the figures for the previous year are given:

Vaccination

				<i>Welfare Centres</i>	<i>Doctor's Surgery</i>	<i>Patient's Home</i>	<i>Total</i>
Primary	....	....	1951	114	346	74	534
			1950	68	356	69	493
Revaccination	....		1951	1	139	6	146
			1950	4	101	10	115

Immunisation — Primary

			<i>Welfare Centres</i>	<i>Doctor's Surgery</i>	<i>Patient's Homes</i>	<i>School Clinics</i>	<i>Total</i>
Diphtheria	....	1951	164	333	59	77	633
		1950	120	174	24	—	318
Whooping Cough	....	1951	22	9	5	—	36
		1950	2	—	—	—	2
Combined Whooping Cough/Diphtheria		1951	50	117	19	—	186
		1950	73	186	10	—	269

Immunisation — Reinforcing Injections

Diphtheria	....	1951	9	173	4	775	961
		1950	—	67	3	—	70
Whooping Cough	....	1951	—	—	—	—	—
		1950	—	—	—	—	—
Combined Whooping Cough/Diphtheria		1951	—	—	—	—	—
		1950	—	1	—	—	1

SECTION 27 — AMBULANCE AND TRANSPORT SERVICE

The temporary scheme in force in the Division for this service whereby arrangements were made with private firms throughout the Division to supply ambulances and cars to convey patients to hospitals, etc., was continued during the year.

The arrangements made with the Chester and District Hospital Management Committee for the garaging of ambulance FLG 492 at the Dutton Recovery Hospital, and with Messrs. Hazlehurst Bros., of Dutton, for the driving and maintenance of this vehicle, were terminated on the 1st April, 1951; arrangements having been made for the transfer of the vehicle on loan to Mr. R. Myers of Runcorn.

The arrangements between the County Council and the Warrington Corporation, whereby the latter supplied ambulances for the conveyance of non-infectious cases from Stockton Heath and the surrounding district and infectious disease cases throughout the area of the Division, was continued during the year.

For patients travelling a considerable distance, where practicable arrangements were made for them to travel by rail, an ambulance being supplied for the conveyance of the patient from his/her home to the nearest railway station, and arrangements made with the distant authority for an ambulance to meet the train on arrival to convey the patient to his/her destination.

During the year the Ambulance and Transport Services Sub-Committee inspected suitable sites in the Runcorn area for the erection thereon of a permanent Ambulance Station for the Division, and recommended to the Committee a site in Clifton Road, Runcorn.

Details of journeys made during the year are as follows:—

(1)			(2)	(3)	(4)	(5)	(6)
			<i>No. of Vehicles 31.12.51</i>	<i>Total No. Journeys 1951</i>	<i>Total No. Patients Carried 1951</i>	<i>No. of Accident and Emergency calls included in Column 3 1951</i>	<i>Total Mileage 1951</i>
A.	DIRECTLY PROVIDED SERVICE	Ambulance	1	262	288	213	9527
		Cars	—	—	—	—	—
B.	AGENCY SERVICE (Red Cross, works regular con- tract firms)	Ambulance	5	563	609	486	17661
		Cars	6	3025	3883	801	79559
C.	SUPPLEMEN- TARY SERVICE (Hospital car service, Taxi firms)	Ambulance	—	—	—	—	—
		Cars	—	2750	3163	381	61695
D. Number of drivers available 31.12.51 for voluntary Car Services included in C above—NIL.							

The Civil Defence Ambulance Service, being the responsibility of the Divisional Health Committee for the County Council—steps are being taken to provide suitable garages, etc., to be used in emergency throughout the Division, also to provide, to commence with, the peace-time establishment of volunteers. All concerned are asked to assist in obtaining volunteers.

SECTION 28

PREVENTION OF ILLNESS, CARE AND AFTER-CARE

Tuberculosis

The Health Visitors were informed of all new cases and asked to visit and complete the environmental report sheet, and where the contacts of the patients had not attended the Chest Clinic for examination, they were advised to do so.

On receipt of the completed report sheets, these were carefully investigated by me, and where the housing conditions of the patients were such that it was advisable that they should be rehoused, the question was taken up with the Housing Departments of the Urban and Rural District Council's, and I am pleased to be able to report that both Councils gave their sympathetic consideration to the rehousing of these cases, and in a large number of cases they were able to rehouse the families. Where the housing accommodation was adequate the patients were strongly advised to occupy separate bedrooms, and in all cases, advice was given on the precautions

to be taken to prevent the spread of infection. Advice was also given to patients on how to obtain extra nourishment and assistance.

In all cases, enquiries were made to see whether it was possible to find the cause of infection.

In a few cases, especially where there were children at home, it was necessary to supply the services of a domestic help.

The chest physicians at the Runcorn and Warrington Chest Clinics tested the child contacts of cases, and during the year 31 B.C.G. injections were given.

When patients were admitted to hospital, arrangements were made for a full disinfection of the premises to be carried out.

The garden chalet which the Committee recommended should be supplied to a patient living in the rural area of the Division was delivered early in the year.

During the year No. 3 Mass Radiography Unit visited Runcorn for a period of approximately three months.

The unit was stationed at the Brunswick Street School, Runcorn, and was open to the public on two days each week. On the other days the unit visited works, factories and certain schools in Runcorn, Frodsham and Helsby.

Although I have not yet received the final report from the Medical Officer in charge of the unit, I understand that the number of persons who attended for examination was very satisfactory from works, etc., and the general public.

A few cases of pulmonary tuberculosis were discovered by the Mass Radiography Unit during their visit in the Division, but the total number of notifications received of new cases of pulmonary tuberculosis during the year was 37, compared with 38 notifications during the previous year when no units were operating in the area.

Details of cases during the period 1st January to 31st December, 1951, are as follows:—

	<i>Pulmonary</i>		<i>Non-Pulmonary</i>		<i>Total</i>
	<i>M.</i>	<i>F.</i>	<i>M.</i>	<i>F.</i>	
(a) Total number of cases on register—					
1st January, 1951	131	97	54	57	339
31st December, 1951	143	109	42	47	341
(b) Removals from register, 1st January to 31st December, 1951—					
Died	6	1	—	—	7
Left district	—	3	—	—	3
Recovered	8	4	13	11	36
	14	8	13	11	46
(c) Number of notifications received, 1st January to 31st December, 1951—					
New cases	23	14	1	1	39
Transfers	3	5	—	—	8
Restored to register	—	1	—	—	1
	26	20	1	1	48

Care of the Aged

The care and after-care of old people living on their own is becoming a more difficult problem, but in conjunction with general practitioners, assistance has been given to have cases admitted to a suitable hospital or hostel, or where this has not been possible, the provision of a domestic help, and a visit by the district nurse.

Whenever there are relations and friends, contact is made with them, if required, so that they can be reminded of their responsibility in the care of the old people and more help can and should be given by relatives in many cases.

As previously mentioned, patients are encouraged to arrange for someone to live in whenever possible and practicable.

The "Over 60" Club in Runcorn does very good work in the care of old people and their work could, with advantage, be copied elsewhere in the Division. In addition Women's Institutes, Townswomen's Guilds and church organisations take an interest in old people's welfare, working in conjunction with ward and parish councils.

The Cheshire County Council are working in close liaison with the Central Council of Social Services, Warrington, in this matter, and hope to give voluntary assistance (visits, "sitters-in," etc.) soon.

Loan of Nursing Equipment

A supply of nursing equipment, apparatus, etc., is available for loan to patients from stocks supplied to district nurses, in accordance with the scale agreed to by the Cheshire County Council and my Committee. A reserve stock is also kept at my Divisional Office.

A patient borrowing equipment under the above heading is required to pay a deposit, which is refunded when the article is returned in good condition.

The number of articles loaned to patients during the year was 142 compared with 125 during the previous year.

Disabled Persons

A Register of Disabled Persons is being brought up-to-date, working in conjunction with, e.g., the District Rehabilitation Officer (Ministry of Labour), doctors, health visitors, district nurses, etc. Action will be taken as required with the District Rehabilitation Officer as regards Disabled Persons.

Home Occupation

In a few cases where patients are suffering from prolonged disability, resultant upon injury or sickness, arrangements have been made, in conjunction with the chest physicians and/or the patient's medical practitioner, and the British Red Cross Society for the supply of materials and apparatus for home occupation.

The patients have found great interest in the work and a new pleasure in life.

Some health visitors have given the greatest assistance to me in this important matter.

Health Education

Copies of my pamphlet "Commonsense Preventive Measures Against Disease" have been widely distributed throughout the Division, and posters on health education matters have been forwarded to shops, etc., for display.

Pamphlets are also left at homes where there are cases of infectious disease, giving details of the precautions to be taken to avoid the spread of infection.

Health matters on the wireless, Central Office of Information films, articles in the Press and magazines have aided health education, but the health visitors' personal visits and talks in the home are the most important means of spreading health education. The matron of the day nursery, Runcorn, and staff also greatly assist in this matter, in addition, doctors, midwives, district nurses and sanitary inspectors.

SECTION 29 — DOMESTIC HEALTH SERVICE

The number of domestic helps available at the 31st December, 1951, was 2 full-time and 23 part-time.

The demand on this service continued to increase during the year, especially for old people living on their own.

All applications for the services of domestic helps were carefully investigated. The health visitors visited all applicants to make full enquiries as to the need of help, and also to enquire whether it was possible for arrangements to be made for relatives to assist, or for someone to live in, in the case of old people living alone, and only where neither of these arrangements were possible, and it was in the interests of the health of the patients that help was provided, were the services of a domestic help supplied.

All protracted cases were revisited at regular intervals to ascertain whether conditions were such that the services of a domestic help could be discontinued, or the number of hours per week the help was supplied, reduced.

At the 31st December, 1951, there were 39 protracted cases remaining on the ledger.

The number of cases attended during the year was 141, an increase of 21 on the previous year. The cases were sub-divided as follows:—

<i>Confinement</i>	<i>Tuberculosis</i>	<i>Aged</i>	<i>Cases of</i>
<i>Cases</i>	<i>Cases</i>	<i>Persons</i>	<i>Other Illness</i>
37	2	66	36

This service is not free to the patient but subject to a "means test."

Where any hardship is claimed after the assessment, the case is referred to the Divisional Health Committee for their decision in the matter.



